



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9492

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|---|
| SERIAL NUMBER 10/821,214 | FILING OR 371(c) DATE 04/08/2004 RULE | CLASS 707 | GROUP ART UNIT 2169 | ATTORNEY DOCKET NO. ROC920030385US1 |
|------------------------------------|---|---------------------|-------------------------------|---|

APPLICANTS
 Melissa Sue Modjeski, Kellogg, MN;
 Har Mohan Puri, Rochester, MN;

**** CONTINUING DATA ******* *None JMB*

**** FOREIGN APPLICATIONS ******* *None JMB*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 06/21/2004**

| | | | | |
|--|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>JMB</i> | STATE OR COUNTRY MN | SHEETS DRAWING 4 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 5 |
|--|-------------------------------|----------------------------|---------------------------|--------------------------------|

ADDRESS
 Robert R. Williams
 IBM Corporation, Dept. 917
 3605 Highway 52 North
 Rochester, MN55901-7829

TITLE
 Testing a database connection

| | | |
|-----------------------------------|---|---|
| FILING FEE RECEIVED 942 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|---|---|